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Bib Data Sheet

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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 26	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> Oliff & Berridge PLC P O Box 19928 Alexandria, VA 22320					
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